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TRANSMITTAL FORM

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Total Number of Pages in This Submission

Application Number 09/657,985 Filing Date September 8, 2000 First Named Inventor Yuzhi QU Art Unit 1751 Examiner Name D. Hamlin Attorney Docket Number 458172000100

ENCLOSURES (Check all that apply)										
X Fee Trans	emittal Form, submitted in (2 pages)	Drawing(s)	After Allowance Communication to Group							
Fee	Attached	Licensing-related Papers	Appeal Communication to Board of Appeals and Interferences							
X Amendme	ent/Reply (7 pages)	Petition	Appeal Communication to Group (Appeal Notice, Brief, Reply Brief)							
Afte	r Final	Petition to Convert to a Provisional Application	Proprietary Information							
Affid	lavits/declaration(s)	Power of Attorney, Revocation Change of Correspondence Address	Status Letter							
X Extension of Time Request (1 page)		Terminal Disclaimer	X Other Enclosure(s) (please identify below):							
Express Abandonment Request		Request for Refund	Return postcard							
Information Disclosure Statement		CD, Number of CD(s)								
Certified Copy of Priority Document(s)										
Response to Missing Parts/ Incomplete Application		Remarks								
Response to Missing Parts										
under 37 CFR 1.52 or 1.53										
SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT										
Firm or Individual name	MORRISON & FOEF E. Thomas Wheelock		mer No. 25226							
Signature	5. Vones Celaeloh									
Date	October, 2003									

I hereby certify that this corres in an envelope addressed to:	spondence is being d Commissioner for Pa	eposited with the laterals, P.O. Box 1	U.S. Postal Service 450, Alexandria, V	e as Express Mail, A 22313-1450, or	Airbill No. EV336629723US,
Dated: October 2, 2003	Signature:((Tamara Alcaraz)	



			Use in lieu (Form updated to reflect FY 2004	of PTO/S8/		
FEE TRANSMITTA		Complete if Known				
	Applica	ation Number	09/657,985			
for FY 2004	Filing E	Date	September 8, 2000			
Effective 10/01/2003, Patent fees are subject to annual revision	First Na	amed Inventor	Yuzhi QU			
	Examin	er Name	D. Hamlin			
pplicant craims small entity status. See 37 CFR 1.2	Art Unit					
TOTAL AMOUNT OF PAYMENT (\$) 55.00						
METHOD OF PAYMENT (check all that apply)	1		458172000100			
Check Credit Money	 	FEE CAL	CULATION (continued)			
	3. ADDITION	IAL FEES				
X Deposit Account:	ł					
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Deposit		ee Fee ode (\$)	Fee Description			
Account Morrison & Foorstor LLD	1051 130 20			Fee Paid		
The Director is authorized to: (check all that apply)		TT GUIONA	rge - late filing fee or oath			
X Characteristics	1052 50 20	952 25 Surcha sheet.	rge – late provisional filing fee or cove	ж		
Charge countries	1053 130 10	53 130 Non-En	glish specification			
X application dee(s) during the pendency of this	1812 2,520 18		a request for ex parte reexamination	<u> </u>		
Charge fee(s) indicated below, except for the filing fee	1804 920* 180	04 920* Reques	ting publication of SIR prior to			
to the above-identified deposit account.		⊏xamine	er action			
FEE CALCULATION	1805 1,840* 180	Examine	ting publication of SIR after er action			
1. BASIC FILING FEE	1251 110 225 1252 420 225	51 55 Extensio	n for reply within first month	55.00		
Large Entity Small Entity		Extensio	n for reply within second month			
Fee Fee	220	Exicisio	n for reply within third month			
1001 770 2001 385 Utility filing fee			n for reply within fourth month			
1002 340 2002 170 Design filing fee	1255 2,010 225 1401 330 240	3,000 = 1,000	n for reply within fifth month	<u> </u>		
1003 530 2003 265 Plant filing fee	1401 330 240 ⁻ 1402 330 240 ⁻	House of				
1004 770 2004 385 Reissue filing fee	1403 290 2403	· ····································	rief in support of an appeal			
1005 160 2005 80 Provisional filing fee	1451 1,510 1451	1.0 100420311	for oral hearing			
SUBTOTAL (1) (\$) 0.00	1452 110 2452	2 55 Petition to	o institute a public use proceeding o revive – unavoidable			
5.00	1453 1,330 2453		revive - unintentional			
2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE	501 1,330 2501		e fee (or reissue)			
Total Claims 10 2011 Claims below Fee Paid	502 480 2502					
Independent 0.00	503 640 2503					
Claims 2 -3** = 0 x 43 = 0.00 Multiple Dependent	460 130 1460	130 Petitions to	the Commissioner			
[807 50 1807) fee under 37 CFR 1.17(q)			
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SUBMITTED BY			(Complete #5			
Name (Print/Type) E. Thomas Wheelock Re	istration No. rney/Agent) 28,8	325	(Complete (if applicable))	— —		
Signature T. Theres Wheeler	rney/Agent) 28,8		Telephone (650) 813-5739			
- CHELLE		ľ	Date October 1 0000	. 7		

Date

October _ / , 2003